## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

	101	021	406
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CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE O			OTHER THAN R SMALL ENTITY		
TOTAL CLAIMS							ļ	RATE	FEE	]	RATE	FEE
FOR			NUMBER FILED		NUME	BER EXTRA		BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			្រំg minus 20≃		* 20 °			X\$ 9=		OR	X\$18=	
INE	EPENDENT C	LAIMS			* 1			X42=		OR	X84=	.×4
ML	ILTIPLE DEPE	NDENT CLAIM P	RESENT					+140=		1	+280=	,
* If the difference in column 1 is less than zero, enter "0" in					"0" in c	column 2	ļ	TOTAL		OR OR	TOTAL	
CLAIMS AS AMENDED - PART II							TOTAL	<u></u>	On	,	THAN	
	A (Column 1) (Column 2) (Co					(Column 3)		SMALL	ENTITY	OR	OTHER THAN SMALL ENTITY	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	* 16	Minus	** 3	LO	=	X\$ 9=			OR	X\$18=	
AME	Independent	* (o ENTATION OF MI	Minus	***	4	= 2		X42=		OR	X84=	168
L	TINOTPHESE	ENTATION OF ME	JUITPLE DEI	PENDENT	CLAIM		۱ [	+140=		OR	+280=	
							L	TOTAL ADDIT. FEE		OR	TOTAL ADDIT: FEE	168
		(Column 1)	<u> </u>	(Colun	nn 2)	(Column 3)		DDN. 1 CE				
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=	٠	OR	X\$18=	
	Independent	*	Minus	***		<u> </u>		X42=		OR	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=	
							L ^	TOTAL DDIT. FEE		OR	TOTAL ADDIT, FEE	
	···	(Column 1)		(Colum		(Column 3)	. ^	DDN. FCC &			ADDII. FEE	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- FIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		ł	X84=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  OR ADDIT. FEE OR ADDIT. FEE												
7	he "Highest Num	ber Previously Paid	i For" (Total or	Independe	nt) is the	highest number	r foun	d in the appr	opriate box	in col	ıma 1.	ſ